Finally, talk to others who are already enrolled in a current plan: Do they like the service they are receiving? Will they continue with the plan?

OPTION #4: OTHER MILITARY FACILITIES

Patients choosing to receive care at another military hospital or clinic should check with that facility. Care may be provided on a space available basis.

MEDICATIONS

Beneficiaries may purchase medications using their Medigap policy, if purchased, or Medicare Managed Care plan, if enrolled. Applicable co-payments will apply. If a beneficiary's doctor prescribes a medication which is in stock at the VAFB pharmacy, they will fill the civilian prescription.

MEDICAL RECORDS

For information about obtaining copies of your medical records, check with your Primary Care Optimization team or the Outpatient Records section.

NOW IS THE TIME TO TAKE ACTION!

This pamphlet is not a complete explanation of Medicare benefits. To receive a full briefing on the pros, cons, limitations, and out-of-pocket expenses associated with Medicare, Medigap policies, or Medicare Managed Care plans, speak with the Health Benefits Advisor.

SOCIAL SECURITY ADMINISTRATION

The number for the Social Security Administration is (800) 772-1213.

Health Insurance Counseling/Advocacy Program (HICAP) Free service to Senior Citizens 1-800-548-5497.

HEALTHCARE SERVICES FOR RETIREES AND THEIR FAMILY MEMBERS

IF YOU ARE 65 YEARS OF AGE OR OLDER READ THIS UPDATE

Military retirees and their family members living on the central coast of California have, for decades, had access to high quality military healthcare at Vandenberg AFB.

The majority of our services are committed to our managed care contract (TRICARE). Due to the limited availability of appointments and strict requirements to meet TRICARE Prime access standards, most of our appointments are reserved for AD and TRICARE Prime beneficiaries. Appointments not scheduled by these two groups will be released on a space-available basis to all other beneficiaries. You should not rely on these limited appointments for your routine healthcare.

YOU MUST TAKE ACTION NOW TO ENSURE GOOD HEALTHCARE COVERAGE IS IN PLACE

We have developed this pamphlet to help YOU with your decision on continued healthcare coverage. The basic options include: 1) Standard Medicare 2) Medicare plus a Medigap policy 3) Enrolling in Medicare Managed Care 4) Other Military Healthcare Facilities.

30SWVA40-5 25 Oct 2000 30MDG/SGO Supercedes 30SWVA40-5, Jun 1997 NOTE: Are you eligible for Medicare?

Almost all retirees and their family members age 65+ are eligible for Medicare. Retirees and family members 65+ who are not eligible for Medicare should stop by and see the Health Benefits Advisor (HBA) who will help determine exactly what healthcare alternatives they are eligible to use. The HBA's office is located on the first floor of the 30th Medical Group, adjacent to the TRICARE Service Center. The HBA's phone number is (805) 734-8232, ext. 68624.

Operating hours are 0730-1730, Monday-Friday.

OPTION #1: STANDARD MEDICARE

By using Medicare benefits, retirees and their family members will have access to the full spectrum of comprehensive medical services. The standard Medicare plan requires the beneficiary to pay some out-of-pocket costs for healthcare services. Medicare is divided into **Part A**, which covers <u>inpatient care</u>, **Part B**, which is optional, and covers <u>outpatient care</u>.

How does Medicare Part B Work?

Three months prior to age 65, retirees and family members are sent a letter asking if they want to participate in Part B. People who elect Part B pay a monthly premium, which is automatically deducted from their monthly Social Security check. Part B costs \$43.80 a month (\$525.60 a year), and requires an additional copayment when seeing a doctor. Retirees or family members who declined to enroll in Part B before they were 65 may still enroll in Part B during the "General Enrollment Period which is every year, between 1 January and 31 March. Outpatient coverage then begins on 1 July. Please note: the monthly premium increases by 10% for each 12 month period a beneficiary was eligible to enroll in Part B, but did not.

OPTION #2: MEDICARE + MEDIGAP

Purchasing a Medigap insurance policy supplement may help off-set the normal Medicare Part A and B out-of-pocket expenses.

OPTION #3: MEDICARE MANAGED CARE

Retirees who choose to enroll in Medicare **Part B**, or who are currently enrolled in Medicare **Part B**, may elect to apply their Medicare benefits to a Medicare Managed Care plan. Medicare Managed Care plans offer a comprehensive health insurance benefit covering inpatient care, outpatient care, and some pharmacy services. There are many different plans from which to choose, with various types of coverage. For example, some plans offer dental care, prescription benefit and eye exams. You may contact the HBA for additional information.

QUESTIONS BENEFICIARIES SHOULD ASK BEFORE ENROLLING IN MEDICARE MANAGED CARE

1) Is any additional payment required above the normal **Part B** premium? 2) What is the level of the pharmacy benefit? 3) How flexible is the plan if you want to change doctors? 4) What is the emergency and non-emergency care coverage when traveling around the country or around the world. 5) What is their skilled nursing facility coverage? 6) Based on the annual average number of times you and your spouse see a doctor, or have been hospitalized, how much would you have paid under the different plans? 7) What about dental examinations, eye examinations, eye glasses, hearing examinations, and mental health coverage?